## BEST AVAILABLE COPY

PATENT APPLICATION FEE DETERMINATION RECORD Effective December 8, 2004									A,	Application or Docket Number			
CLAIMS AS FILED - PART I									111351720				
L				(Column 1)		(Column 2)		SMALL ENT TYPE		OF	OTHER THAN OR SMALL ENTITY		
Ľ	S. NATIONA	L STAGE FEES					7	RATE	FEE	7	RATE	T	
BASIC FEE			SMALL	ENT. = \$ 150	LÄ	RGE ENT. = \$ 300	1	BASIC FEE	-	$\dashv$		FEE	
EXAMINATION FEE			Satisfies P (4) ≐	Satisfies PCT Article 33(1)- (4) = \$50/\$100		other situations = \$ 100 / \$ 200	1	EXAM. FEE	<del> </del>	- OR	BASIC FEE		
SEARCH FEE .			U.S. Is ISA ALL oth	U.S. is ISA = \$50 / \$100 ALL other countries = \$200 / \$400		All other situations = \$ 250 / \$ 500		SEARCH FEE	<del>                                     </del>	-	EXAM. FEE SEARCH FEE	Ally	
FEE FOR EXTRA SPEC. PGS.				minus 100 =		/ 50 ≐		X \$ 125 =	<del> </del>	+		1001	
TOTAL CHARGEABLE CLAIMS			10	minus 20 =	*			X \$ 25 =	<del>                                     </del>	1	X \$ 250 =	<del> </del>	
NDEPENDENT CLAIMS			17	minus 3 =	* '			X \$ 100 =	<del> </del>	OR	X \$ 50 =	<del> </del>	
MU	LTIPLE DEPE	NDENT CLAIM PE	RESENT	SENT				+ \$ 180 =	<del> </del>	OR	X \$ 200 ≈	<u> </u>	
If the difference in column 1 is less than zero, enter "0" in column 2							! !	TOTAL		OR OR	+ \$ 360 =	<u> </u>	
AMENDMENTA		(Column 1)  CLAIMS  REMAINING  AFTER  AMENDMENT		(Colum HIGHE NUMB PREVIOU	ST ER JSLY	T PRESENT EXTRA		SMALL E	ADDI- TIONAL	OR	OTHER SMALL I		
	Total	*	Minus	PAID F	OR	-	ŀ	V 6 05	FEE			FEE	
	Independent	*	Minus	***			ŀ	X \$ 25 =		OR	X \$ 50 =		
	FIRST PRE	SENTATION OF N	I NULTIPLE DI	EPENDENT CI	AIM		1	X \$ 100 =		OR	X \$ 200 =		
						<u> </u>	٠Ļ	+ \$ 180 = OTAL ADDIT.		OR	+ \$ 360 =		
		÷		•				FEE		OR	TOTAL ADDIT. FEE		
7		(Column 1)	<del> </del>	(Column		(Column 3)	_						
ž ŀ		REMAINING AFTER AMENDMENT		HIGHES NUMBE PREVIOU PAID FO	R SLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	<u> </u>	Minus	**		=	Γ	X \$ 25 =		OR	X \$ 50 =		
	ndependent	L	Minus	***		=	7	< \$ 100 =		OR	X \$ 200 =		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+ \$ 180 =			+ \$ 360 =		
							TC	TAL ADDIT. FEE			OTAL ADDIT.		
			•	•		, <i>:</i>	•				FEE L		

If the "Highest Number Previously Paid For" IN THIS SPACE is less than '20', enter "20".

If the "Highest Number Previously Paid For" IN THIS SPACE is less than '3', enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.